



HAWAII STATE ETHICS COMMISSION  
1001 BISHOP STREET, PACIFIC TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL.: 587-0460 FAX: 587-0470

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## LOBBYIST REGISTRATION FORM

(See back of this form for instructions)

(Type or Print Clearly)

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STATE OF HAWAII  
STATE ETHICS COMMISSION

### PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
Hirano,	Amy	C.	536-5688
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
84 N. King Street	Honolulu,	HI	96817
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Pacific Management Consultants, Inc.			536-5688
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
84 N. King Street	Honolulu,	HI	96817

### PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE				
The Wine Institute	206-232-5171				
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)		
P.O. Box 3	Mercer Island,	WA	98040		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE		
MAILING ADDRESS (Street)			(City)	(State)	(Zip Code)

### PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input checked="" type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input checked="" type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy, Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

### PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Amy C. Hirano

(Signature of Lobbyist)

1-16-03

(Date)

### PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
Sydney A. Abrams	Government Affairs Mgr., Western States		
NAME OF ORGANIZATION (if applicable)	TELEPHONE		
The Wine Institute	206-232-5171		
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
P.O. Box 3	Mercer Island,	WA	98040
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.			
<u>Sydney A. Abrams</u>			<u>Jan 21, 2003</u>
(Signature of Authorizing Officer or Person Represented)			(Date)